

**Alabama Medicaid Agency  
Pharmacy and Therapeutics Committee  
Date of Meeting: Wednesday, May 4, 2022  
Preferred Drug List Final**

AHFS Drug Class Re-reviewed: HYPOTENSIVE AGENTS

Subclasses Reviewed

- Central Alpha-Agonists
- Direct Vasodilators
- Peripheral Adrenergic Inhibitors
- Hypotensive Agents, Miscellaneous

AHFS Drug Class Re-reviewed: ALPHA-ADRENERGIC BLOCKING AGENTS

AHFS Drug Class Re-reviewed: BETA-ADRENERGIC BLOCKING AGENTS

AHFS Drug Class Re-reviewed: CALCIUM-CHANNEL BLOCKING AGENTS

Subclasses Reviewed

- Dihydropyridines
- Calcium-Channel Blocking Agents, Miscellaneous

AHFS Drug Class Re-reviewed: RENIN-ANGIOTENSIN-ALDOSTERONE SYSTEM INHIBITORS

Subclasses Reviewed

- Angiotensin-Converting Enzyme Inhibitors
- Angiotensin II Receptor Antagonists
- Mineralocorticoid (Aldosterone) Receptor Antagonists
- Renin Inhibitors

AHFS Drug Class Re-reviewed: DIURETICS

Subclasses Reviewed

- Loop Diuretics
- Potassium-Sparing Diuretics
- Thiazide Diuretics
- Thiazide-like Diuretics
- Vasopressin Antagonists
- Diuretics, Miscellaneous

AHFS Drug Class Re-reviewed: ALZHEIMER'S AGENTS

\*Denotes generic available in at least one dosage form or strength

Drug name denotes all dosage forms and strengths unless noted

<sup>c</sup>Denotes agent is preferred with clinical criteria in place

## Central Alpha-Agonists

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	CATAPRES-TTS*	clonidine patches (generic)

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## Direct Vasodilators

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	BIDIL*

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## Peripheral Adrenergic Inhibitors

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	None

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## Hypotensive Agents, Miscellaneous

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	VECAMYL

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## Alpha-Adrenergic Blocking Agents

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	CARDURA* CARDURA XL MINIPRESS*

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## Beta-Adrenergic Blocking Agents

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	BYSTOLIC* HEMANGEOL <sup>CC</sup>	BETAPACE* BETAPACE AF* COREG* COREG CR* CORGARD* INDERAL LA* INDERAL XL INNOPRAN XL KAPSPARGO SPRINKLE LEVATOL LOPRESSOR* SOTYLIZE TENORETIC* TENORMIN* TOPROL XL* ZIAC*

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## Dihydropyridines

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ADALAT CC* AZOR* CLEVIPREX EXFORGE* EXFORGE HCT* KATERZIA LOTREL* NORVASC* NYMALIZE PROCARDIA XL* SULAR*

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### Calcium-Channel Blocking Agents, Miscellaneous

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	CALAN SR* CARDIZEM* CARDIZEM CD* CARDIZEM LA* MATZIM LA* TIAZAC* VERELAN* VERELAN PM*

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## Angiotensin-Converting Enzyme Inhibitors

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ACCUPRIL* ACCURETIC* ALTACE* EPANED* LOTENSIN* LOTENSIN HCT* PRINIVIL* PRINZIDE* QBRELIS VASERETIC* VASOTEC* ZESTORETIC* ZESTRIL*

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## Angiotensin II Receptor Antagonists

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ATACAND* ATACAND HCT* AVALIDE* AVAPRO* BENICAR* BENICAR HCT* COZAAR* DIOVAN* DIOVAN HCT* EDARBI EDARBYCLOR HYZAAR* MICARDIS* MICARDIS HCT* TRIBENZOR*

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## Mineralocorticoid (Aldosterone) Receptor Antagonists

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	None	ALDACTAZIDE* ALDACTONE* CAROSPIR INSPRA* KERENDIA

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## Renin Inhibitors

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	TEKTURNA* TEKTURNA HCT

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### Loop Diuretics

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	EDECIN* LASIX*

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## Potassium-Sparing Diuretics

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	MAXZIDE*

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### Thiazide Diuretics

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	DIURIL

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### Thiazide-like Diuretics

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	THALITONE

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## Vasopressin Antagonists

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	JYNARQUE SAMSCA*

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### Diuretics, Miscellaneous

<b>Preferred Generic</b>	<b>Preferred Brand</b>	<b>Non-Preferred Brand or PA Generic</b>
All covered products	None	None

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## Alzheimer's Agents

Preferred Generic	Preferred Brand	Non-Preferred Brand or PA Generic
All covered products	ARICEPT*	ADUHELM EXELON* NAMENDA* NAMENDA XR* NAMZARIC RAZADYNE ER*

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